

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Marco Rubio for President**

**A. Full Name (Last, First, Middle Initial)**

**MR. JOHN L. WOOLF**

Mailing Address 7041 N. VAN NESS

City  
FRESNO

State Zip Code  
CA 93711-7169

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

**Transaction ID : SA17.759425**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 03 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

1000.00

**B. Full Name (Last, First, Middle Initial)**

**MRS. BARBARA WOOLLEN**

Mailing Address 2 CRYSTAL TREE PASS

City  
HENDERSON

State Zip Code  
NV 89052-6701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17.761355**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 08 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

500.00

**C. Full Name (Last, First, Middle Initial)**

**MR. BASIL C. WOOLLEY**

Mailing Address P.O. BOX 8

City  
DEL MAR

State Zip Code  
CA 92014-0008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

380.00

**Transaction ID : SA17.746119**

Date of Receipt

M M / D D / Y Y Y Y  
04 / 29 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

100.00

**Subtotal Of Receipts This Page (optional)**.....

1600.00

**Total This Period (last page this line number only)**.....